

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)							SERIAL NO. 10582748		FILING DATE				
CLAIMS							APPLICANT(S)						
	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT			AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		1				51						
2		1		1			52						
3		1		1			53						
4		1		1			54						
5		1		1			55						
6		5		1			56						
7		5		1			57						
8		①		1			58						
9		1	1				59						
10		1		1			60						
11	1		1				61						
12	X						62						
13		1	1	1			63						
14		1		1			64						
15		2		1			65						
16				1			66						
17							67						
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46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.	3	↓	3	↓		↓	TOTAL IND.		↓		↓		↓
TOTAL DEP.	21	←	11	←		←	TOTAL DEP.		←		←		←
TOTAL CLAIMS	24		14				TOTAL CLAIMS						

PTO - 1360 (REV. 04/2007)

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